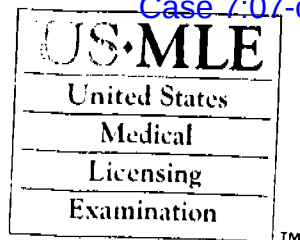


EXHIBIT

C



UNITED STATES MEDICAL LICENSING EXAMINATION™

USMLE Step 2 is administered to students and graduates of U.S. and Canadian medical schools by the
NATIONAL BOARD OF MEDICAL EXAMINERS® (NBME®)
 3750 Market Street, Philadelphia, Pennsylvania 19104-3190.
 Telephone: (215) 590-9700

STEP 2 SCORE REPORT

Grant, C Earl

**3142 Pillsbury Avenue South
 Minneapolis, MN 55408-3035**

USMLE ID: 4-048-306-7

Test Date: August 1997

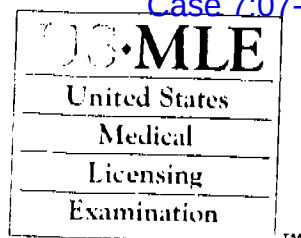
The USMLE is a single examination program for all applicants for medical licensure in the United States; it has replaced the Federation Licensing Examination (FLEX) and the certifying examinations of the National Board of Medical Examiners (NBME Parts I, II and III). The program consists of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. **Step 2** is designed to assess whether an examinee possesses the medical knowledge and understanding of clinical science considered essential for the provision of patient care under supervision, including emphasis on health promotion and disease prevention. The inclusion of Step 2 in the USMLE sequence ensures that attention is devoted to principles of clinical science that undergird the safe and competent practice of medicine. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. The two numeric scores shown below are equivalent; each state or territory may use either score in making licensing decisions. These scores represent your results for the administration of Step 2 on the test date shown above.

| | |
|---------------|---|
| FAIL + | This result is based on the minimum passing score recommended by USMLE for Step 2. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions. |
| 155 + | This score is determined by your overall performance on Step 2. For recent administrations, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools are approximately 207 and 23, respectively, with most scores falling between 140 and 260. A score of 170 is recommended by USMLE to pass Step 2. The standard error of measurement (SEM) [‡] for this scale is approximately six points. |
| 71 + | This score is also determined by your overall performance on the examination. A score of 82 on this scale is equivalent to a score of 200 on the scale described above. A score of 75 on this scale, which is equivalent to a score of 170 on the scale described above, is recommended by USMLE to pass Step 2. The SEM [‡] for this scale is one point. |

+Following review and approval of your written request, testing accommodations were provided during the administration of this examination. A similar annotation will be included on your USMLE transcript.

‡Your score is influenced both by your general understanding of clinical science and the specific set of items selected for this Step 2 examination. The standard error of measurement (SEM) provides an estimate of the range within which your scores might be expected to vary by chance if you were tested repeatedly using similar tests.

451EK232



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STEP 2 SCORE REPORT

Grant, C Earl

**3142 Pillsbury Avenue South
 Minneapolis, MN 55408-3035**

USMLE ID: 4-048-306-7

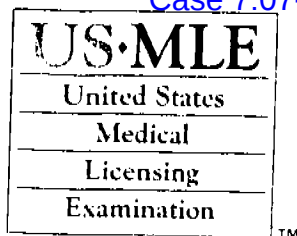
Test Date: March 1998

The USMLE is a single examination program for all applicants for medical licensure in the United States; it has replaced the Federation Licensing Examination (FLEX) and the certifying examinations of the National Board of Medical Examiners (NBME Parts I, II and III). The program consists of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. **Step 2** is designed to assess whether an examinee possesses the medical knowledge and understanding of clinical science considered essential for the provision of patient care under supervision, including emphasis on health promotion and disease prevention. The inclusion of Step 2 in the USMLE sequence ensures that attention is devoted to principles of clinical science that undergird the safe and competent practice of medicine. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. The two numeric scores shown below are equivalent; each state or territory may use either score in making licensing decisions. These scores represent your results for the administration of Step 2 on the test date shown above.

| | |
|---------------|---|
| FAIL + | This result is based on the minimum passing score set by USMLE for Step 2. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions. |
| 165 + | This score is determined by your overall performance on Step 2. For recent administrations, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools are approximately 207 and 23, respectively, with most scores falling between 140 and 260. A score of 170 is set by USMLE to pass Step 2. The standard error of measurement (SEM) [‡] for this scale is approximately six points. |
| 73 + | This score is also determined by your overall performance on the examination. A score of 82 on this scale is equivalent to a score of 200 on the scale described above. A score of 75 on this scale, which is equivalent to a score of 170 on the scale described above, is set by USMLE to pass Step 2. The SEM [‡] for this scale is one point. |

+Following review and approval of your written request, testing accommodations were provided during the administration of this examination. A similar annotation will be included on your USMLE transcript.

‡Your score is influenced both by your general understanding of clinical science and the specific set of items selected for this Step 2 examination. The standard error of measurement (SEM) provides an estimate of the range within which your scores might be expected to vary by chance if you were tested repeatedly using similar tests.



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STEP 2 SCORE REPORT

Grant, C Earl

**3142 Pillsbury Avenue South
 Minneapolis, MN 55408-3035**

USMLE ID: 4-048-306-7

Test Date: August 1998

The USMLE is a single examination program for all applicants for medical licensure in the United States; it has replaced the Federation Licensing Examination (FLEX) and the certifying examinations of the National Board of Medical Examiners (NBME Parts I, II and III). The program consists of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. **Step 2** is designed to assess whether an examinee possesses the medical knowledge and understanding of clinical science considered essential for the provision of patient care under supervision, including emphasis on health promotion and disease prevention. The inclusion of Step 2 in the USMLE sequence ensures that attention is devoted to principles of clinical science that undergird the safe and competent practice of medicine. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. The two numeric scores shown below are equivalent; each state or territory may use either score in making licensing decisions. These scores represent your results for the administration of Step 2 on the test date shown above.

FAIL +

This result is based on the minimum passing score set by USMLE for Step 2. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

169 +

This score is determined by your overall performance on Step 2. For recent administrations, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools are approximately 208 and 23, respectively, with most scores falling between 140 and 260. A score of 170 is set by USMLE to pass Step 2. The standard error of measurement (SEM)[‡] for this scale is approximately six points.

74 +

This score is also determined by your overall performance on the examination. A score of 82 on this scale is equivalent to a score of 200 on the scale described above. A score of 75 on this scale, which is equivalent to a score of 170 on the scale described above, is set by USMLE to pass Step 2. The SEM[‡] for this scale is one point.

+Following review and approval of your written request, testing accommodations were provided during the administration of this examination. A similar annotation will be included on your USMLE transcript.

‡Your score is influenced both by your general understanding of clinical science and the specific set of items selected for this Step 2 examination. The standard error of measurement (SEM) provides an estimate of the range within which your scores might be expected to vary by chance if you were tested repeatedly using similar tests.



National Board of Medical Examiners®

3750 MARKET STREET, PHILADELPHIA, PA 19104
TELEPHONE (215) 500-0500

August 29, 1995

Mr. C. Earl Grant
3142 Pillsbury Avenue South
Minneapolis, MN 55408

USMLE# 4-048-306-7

Dear Mr. Grant:

In accordance with your recent request, we have hand scored your answer materials from the following examination:

Examination

Test Date

USMLE Step 1

June 1995

The result of the hand scoring process has confirmed that your scores are accurate as originally reported.

Because of the many verification procedures built into the machine scoring process, the possibility of score changes has become extremely remote.

I regret I cannot give you a more favorable report.

Sincerely,

Janice V. Cass
Assistant Manager, Examinee Records

JVC.cr



National Board of Medical Examiners[®]

3750 MARKET STREET, PHILADELPHIA, PA 19104
TELEPHONE (215) 690-3500

January 6, 1998

USMLE ID# 4-048-306-7

C. Earl Grant, PhD
3142 Pillsbury Avenue South
Minneapolis, MN 55408-3035

Dear Dr. Grant:

In accordance with your recent request, we have hand scored your answer materials from the following examination:

Examination

Test Date

USMLE Step 2

August 1997

The result of the hand scoring process has confirmed that your scores are accurate as originally reported.

Because of the many verification procedures built into the machine scoring process, the possibility of score changes has become extremely remote.

I regret I cannot give you a more favorable report.

Sincerely,

Inna Rozinsky
Supervisor for Registration
and Examinee Records

IR:ad

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FROM COPY ROOM 16TH FL E

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PAGE.002

98 10:54 FROM: N B M E

ID: 215 590 9755

PAGE 2/4



National Board of Medical Examiners

3750 MARKET STREET, PHILADELPHIA, PA 19104
TELEPHONE (215) 590-9500

USMLE ID# 4-048-308-7

June 22, 1998

C. Earl Grant, PhD
3142 Pillsbury Avenue South
Minneapolis, MN 55408-3035

Dear Dr. Grant:

In lieu of your request dated May 4, 1998 (received May 11, 1998), we have been informed that you seek to have your USMLE Step 2 examination manually scored pursuant to NBME's standard procedures. As a consequence, in accordance with this request, we have hand scored your answer materials from the following examination:

Examination

Test Date

USMLE Step 2

March 1998

The result of the hand scoring process has confirmed that your scores are accurate as originally reported.

Because of the many verification procedures built into the machine scoring process, the possibility of score changes has become extremely remote.

I regret I cannot give you a more favorable report.

Sincerely,

Inna Rozinsky
Supervisor for Registration
and Examinee Records

IR:ab

JUN 22 '98 10:10

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PAGE 02

++ TOTAL PAGE.002 ++

CLIENT ASSISTANCE PROJECT

LEGAL ADVOCACY FOR PERSONS
WITH DEVELOPMENTAL DISABILITIES

MENTAL HEALTH LAW PROJECT

PROTECTION AND ADVOCACY FOR
INDIVIDUAL RIGHTS

EXECUTIVE DIRECTOR
Jeremy Lane

MANAGING ATTORNEYS
Luther A. Granquist
Pamela S. Hoopes

CENTER MANAGER
Lisa Cohen

MINNESOTA DISABILITY LAW CENTER

THE PROTECTION & ADVOCACY
SYSTEM FOR MINNESOTA

430 FIRST AVENUE NORTH, SUITE 300
MINNEAPOLIS, MN 55401-1780
(612) 332-1441
(TDD) 332-4668
Toll Free 1-800-292-4150
FAX (612) 334-5755

ATTORNEYS

Charlene F. D'Criz
Steven P. Elliot
Amy Jane Goetz
Kathleen Hagen
Anne L. Henry
Kathy S. Kosnoff
Roderick J. Macpherson III
Anne M. Robertson
Barnett I. Rosentfield
Patricia M. Siebert

ADVOCATES

Linda Bonney (Grand Rapids)
Kirsten Dubbels (Fergus Falls)
Sandra M. Moore (Duluth)
Sharon Sanders (Duluth)
Marilyn Spensley (Park Rapids)

June 22, 1998

Magistrate Judge Jonathan G. Lebedoff
United States Magistrate Judge
U.S. Courthouse, Suite 9E
300 South 4th Street
Minneapolis, MN 55415

VIA MESSENGER

RE: C. Earl Grant and Celi V. Watts v. National Board of Medical Examiners
Civil No. CV 3-96-310

Dear Magistrate Judge Lebedoff:

I am writing to advise you about the status of the Settlement Agreement between Dr. Grant and the National Board of Medical Examiners.

On June 16, I notified Ms. Mayeron that Dr. Grant proposed to settle the lawsuit based upon the last Settlement Agreement that the parties had been negotiating in your chambers in May. I told Ms. Mayeron that Dr. Grant would sign the Settlement Agreement if the defendant would cancel its motion, including the motion for attorneys' fees. On June 17, Ms. Mayeron informed me that NBME had accepted Dr. Grant's settlement proposal and that it would withdraw the motion if he signed the settlement documents no later than Friday, June 19. Ms. Mayeron asked me to draft the Agreement.

On June 18, I delivered a draft of the proposed final version of the Confidential Settlement Agreement and Release to Ms. Mayeron by facsimile. Ms. Mayeron and I reviewed the document on June 18 and she informed me that NBME had approved the document subject to some minor language changes. Ms. Mayeron told me all of the changes that NBME wished to have made in the document. I revised the Confidential Settlement Agreement on June 18 and incorporated all of the language changes which NBME had required. I then submitted the Confidential Settlement Agreement and Release which NBME had approved to Dr. Grant for his signature.

Dr. Grant signed the Settlement Agreement on June 19. I faxed a copy of the signature page from the Settlement Agreement to Ms. Mayeron on Friday. I am enclosing a copy of the

Magistrate Judge Jonathan G. Lebedoff
June 22, 1998
Page 2

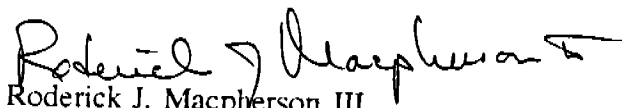
signature page from the Settlement Agreement to document the fact that Dr. Grant has signed the Agreement.

On June 19, after NBME had accepted Dr. Grant's settlement proposal and had approved the language of the Confidential Settlement Agreement and Release, Ms. Mayeron advised me that NBME was now demanding that a new term must be included in the Settlement Agreement. This was a term that had never before been discussed by the parties and was not part of the Settlement Agreement that was reached on December 29, 1997. It is Dr. Grant's position that he proposed, and NBME accepted, a settlement agreement and NBME approved the document which he has now signed.

Based on the fact that Dr. Grant has signed the Settlement Agreement, I believe this matter has been resolved.

Sincerely,

MINNESOTA DISABILITY LAW CENTER


Roderick J. Macpherson III
Attorney at Law

RJM:cas

Enclosure

cc: Janie Mayeron
C. Earl Grant ✓
Pamela Hoopes



National Board of Medical Examiners®

3750 MARKET STREET, PHILADELPHIA, PA 19104
TELEPHONE (215) 590-9500

USMLE ID# 4-048-306-7

November 20, 1998

C. Earl Grant
3142 Pillsbury Avenue South
Minneapolis, MN 55408-3035

Dear Mr. Grant:

In accordance with your recent request, we have hand scored your answer materials from the following examinations:

Examination

Test Date

USMLE Step 2
USMLE Step 2

August 1997
March 1998

The result of the hand scoring process has confirmed that your scores are accurate as originally reported.

Because of the many verification procedures built into the machine scoring process, the possibility of score changes has become extremely remote.

I regret I cannot give you a more favorable report.

In connection with your written request to manually recheck your answers for the August 1997 and March 1998 USMLE Step 2, you submitted a check in the amount of \$150.00. The fee for each manual recheck is \$25.00; accordingly, you will be forwarded under a separate cover a refund in the amount of \$100.00.

Sincerely,

A handwritten signature in black ink, appearing to read "Inna Rozinsky", is written over a horizontal line.

Inna Rozinsky
Supervisor for Registration
and Examinee Records

IR:ab



National Board of Medical Examiners®

3750 MARKET STREET, PHILADELPHIA, PA 19104
TELEPHONE (215) 590-9500

USMLE ID# 4-048-306-7

December 16, 1998

C. Earl Grant
3142 Pillsbury Avenue South
Minneapolis, MN 55408-3035

Dear Mr. Grant:

In accordance with your request, dated December 5, 1998, we have hand scored your answer materials from the following examination:

Examination

Test Date

USMLE Step 2

August 1998

The result of the hand scoring process has confirmed that your scores are accurate as originally reported.

Because of the many verification procedures built into the machine scoring process, the possibility of score changes has become extremely remote.

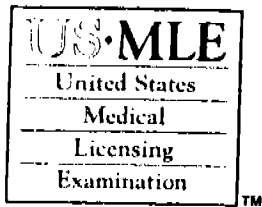
Your letter of December 5 also stated: "I further request that following the hand-scoring and corrections, copies of my USMLE Transcript be forwarded to me along with the corrected scores for this examination." Given that there is no correction to be made to your August 1998 Step 2 scores, it is not clear whether you still wish us to comply with your request for transcripts. Please advise me in this regard. If I do not hear from you to the contrary prior to December 31, I will presume you do not wish to have transcripts provided to you and will forward to you a refund check in the amount of \$40.00.

Sincerely,

A handwritten signature in black ink, appearing to read "Inna Rozinsky".

Inna Rozinsky
Supervisor for Registration
and Examinee Records

IR:ab



UNITED STATES MEDICAL LICENSING EXAMINATION™

Federation of State Medical Boards of the U.S., Inc.
 P.O. Box 619850, Dallas, Texas 75261-9850
 Telephone: (817) 868-4041

STEP 3 SCORE REPORT

Grant, Carrol Earl

Test Date: July 25, 2005

USMLE ID: 4-048-306-7

The USMLE is a single examination program for all applicants for medical licensure in the United States; it replaced the Federation Licensing Examination (FLEX) and the certifying examinations of the National Board of Medical Examiners (NBME Parts I, II and III). The program consists of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. **Step 3** is designed to assess whether an examinee possesses the medical knowledge and understanding of clinical science considered essential for the unsupervised practice of medicine, with an emphasis on patient management in ambulatory-care settings. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. The two numeric scores shown below are equivalent; each state or territory may use either score in making licensing decisions. These scores represent your results for the administration of Step 3 on the test date shown above.

FAIL +

This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

160 +

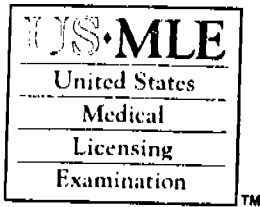
This score is determined by your overall performance on Step 3. For recent administrations, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 213 and 17, respectively, with most scores falling between 140 and 260. A score of 184 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)[‡] for this scale is approximately six points.

64 +

This score is also determined by your overall performance on the examination. A score of 75 on this scale, which is equivalent to a score of 184 on the scale described above, is recommended by USMLE to pass Step 3. The SEM[‡] for this scale is approximately three points.

+Following review and approval of your written request, testing accommodations were provided during the administration of this examination. A similar annotation will be included on your USMLE transcript.

‡Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.



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Telephone: (817) 868-4041

[Duplicate]

STEP 3 SCORE REPORT

Grant, Carrol Earl

Test Date: November 1, 2006

USMLE ID: 4-048-306-7

The USMLE is a single examination program for all applicants for medical licensure in the United States; it replaced the Federation Licensing Examination (FLEX) and the certifying examinations of the National Board of Medical Examiners (NBME Parts I, II and III). The program consists of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. **Step 3** is designed to assess whether an examinee possesses the medical knowledge and understanding of clinical science considered essential for the unsupervised practice of medicine, with an emphasis on patient management in ambulatory-care settings. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. The two numeric scores shown below are equivalent; each state or territory may use either score in making licensing decisions. These scores represent your results for the administration of Step 3 on the test date shown above.

FAIL +

This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

161 +

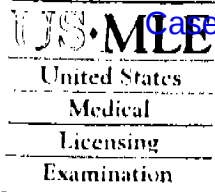
This score is determined by your overall performance on Step 3. For recent administrations, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 213 and 17, respectively, with most scores falling between 140 and 260. A score of 184 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)[†] for this scale is approximately seven points.

65 +

This score is also determined by your overall performance on the examination. A score of 75 on this scale, which is equivalent to a score of 184 on the scale described above, is recommended by USMLE to pass Step 3. The SEM[‡] for this scale is approximately three points.

+Following review and approval of your written request, testing accommodations were provided during the administration of this examination. A similar annotation will be included on your USMLE transcript.

†Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.



UNITED STATES MEDICAL LICENSING EXAMINATION

Federation of State Medical Boards of the U.S., Inc.
P.O. Box 619850, Dallas, Texas 75261-9850
Telephone: (817) 868-4041

STEP 3 SCORE REPORT

Grant, Carrol Earl

Test Date: July 21, 2004

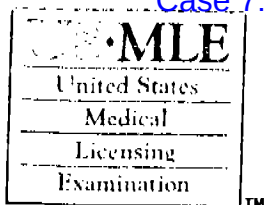
USMLE ID: 4-048-306-7

The USMLE is a single examination program for all applicants for medical licensure in the United States. It replaced the Federation Licensing Examination (FLEX) and the certifying examinations of the National Board of Medical Examiners (NBME Parts I, II and III). The program consists of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in the diagnosis, management of disease and that constitute the basis of safe and effective patient care. **Step 3** is designed to assess whether an examinee possesses the medical knowledge and understanding of clinical science considered essential for the unsupervised practice of medicine, with an emphasis on patient management in ambulatory-care settings. Results of the examination are reported to medical licensing authorities in the United States and other countries for use in granting an initial license to practice medicine. The two numeric scores shown below are the scores for each state or territory may use either score in making licensing decisions. These scores represent your performance for the administration of Step 3 on the test date shown above.

| | |
|---------------|--|
| FAIL + | This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions. |
| 166 + | This score is determined by your overall performance on Step 3. For previous administrations, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 211 and 18, respectively, with most scores falling between 140 and 260. A score of 184 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM) [†] for this scale is approximately six points. |
| 67 + | This score is also determined by your overall performance on the examination. A score of 75 on this scale, which is equivalent to a score of 184 on the scale described above, is recommended by USMLE to pass Step 3. The SEM [†] for this scale is approximately six points. |

+Following review and approval of your written request, testing accommodations were provided during the administration of this examination. A similar annotation will be included on your USMLE transcript.

†Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected if you were to retake the examination.



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 P.O. Box 619850, Dallas, Texas 75261-9850
 Telephone: (817) 868-4041

STEP 3 SCORE REPORT

Grant, Carrol Earl

Test Date: December 7, 2004

USMLE ID: 4-048-306-7

The USMLE is a single examination program for all applicants for medical licensure in the United States; it replaced the Federation Licensing Examination (FLEX) and the certifying examinations of the National Board of Medical Examiners (NBME Parts I, II and III). The program consists of three Steps designed to assess an examinee's understanding of and ability to apply concepts and principles that are important in health and disease and that constitute the basis of safe and effective patient care. **Step 3** is designed to assess whether an examinee possesses the medical knowledge and understanding of clinical science considered essential for the unsupervised practice of medicine, with an emphasis on patient management in ambulatory-care settings. Results of the examination are reported to medical licensing authorities in the United States and its territories for use in granting an initial license to practice medicine. The two numeric scores shown below are equivalent; each state or territory may use either score in making licensing decisions. These scores represent your results for the administration of Step 3 on the test date shown above.

FAIL +

This result is based on the minimum passing score recommended by USMLE for Step 3. Individual licensing authorities may accept the USMLE-recommended pass/fail result or may establish a different passing score for their own jurisdictions.

164 +

This score is determined by your overall performance on Step 3. For recent administrations, the mean and standard deviation for first-time examinees from U.S. and Canadian medical schools were approximately 211 and 18, respectively, with most scores falling between 140 and 260. A score of 184 is recommended by USMLE to pass Step 3. The standard error of measurement (SEM)[†] for this scale is approximately six points.

66 +

This score is also determined by your overall performance on the examination. A score of 75 on this scale, which is equivalent to a score of 184 on the scale described above, is recommended by USMLE to pass Step 3. The SEM[†] for this scale is approximately two points.

+Following review and approval of your written request, testing accommodations were provided during the administration of this examination. A similar annotation will be included on your USMLE transcript.

†Your score is influenced both by your general understanding of clinical medicine and by the specific set of items selected for this Step 3 examination. The Standard Error of Measurement (SEM) provides an index of the variation in scores that would be expected to occur if an examinee were tested repeatedly using different sets of items covering similar content.